

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION

PERMIT

PERMIT ISSUED
Permit Number: 060276

MAR 14 2006

12 BO 500
CITY OF PORTLAND

This is to certify that D & I WEEKS PROPERTIES LLC/Bourgoin & Sons

has permission to install B-vent for convection oven

AT 369 FOREST AVE

provided that the person or persons who perform or supervise the work accepting this permit shall comply with all of the provisions of the Statutes of the State and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and when permission procedure is complete this building or part thereof shall not be occupied or service closed-in until 24 HOURS NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. Craig Cass 3-10-06

Health Dept. _____

Appeal Board _____

Other _____

Department Name _____

[Signature]
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 06-0276	Issue Date: PERMIT ISSUED MAR 14 2006	DBL: 112 B015001
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Location of Construction: 369 FOREST AVE	Owner Name: D & J WEEKS PROPERTIES LLC	Owner Address: PO BOX 8009	Phone:
Business Name:	Contractor Name: Bourgoin & Sons	Contractor Address: 123 Davis Road	Phone: 207 491 878
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: B2 Prime
Past Use: Commercial/ Adult day habilitation services - small bakery & retail outlet - offices and a place for dances <i>see permit #05-1835</i>	Proposed Use: Adult day habilitation services etc./ install B-vent for convectional oven	Permit Fee: \$39.00	Cost of work: \$1,400.00
Proposed Project Description: install B-vent for convectional oven		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied TO NFPA 91	CEO District: 1
		INSPECTION: Use Group: HVAC ONLY Type: 3B 3/13/06	<i>some P-5 inspection w/</i>
		Signature:	Signature: <i>[Signature]</i>
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied			
		Signature:	Date:

Permit Taken By: Idobson	Date Applied For: 02/28/2006	Zoning Approval	
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Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> <i>ok with conditions</i> Date: <i>3/17/06</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved Date:	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>[Signature]</i>
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CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 06-0309	Date Applied For: 03/08/2006	CBL: 184 G001001
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Location of Construction: 602 Brighton Ave	Owner Name: Joseph R. Mazziotti	Owner Address: 555 Forest Ave.	Phone: 207-775-3148
Business Name: n/a	Contractor Name: n/a	Contractor Address: n/a Portland	Phone:
Lessee/Buyer's Name: n/a	Phone: n/a	Permit Type: Change of Use - Commercial	

Proposed Use: Change of Use; From Single Family to law Office (cosmetic work).	Proposed Project Description: Change of Use; From Single Family to law Office (cosmetic work)
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Dept: Building **Status:** Approved with Conditions **Reviewer:** Mike Nugent **Approval Date:** 03/14/2006

Note: **Ok to Issue:**

1) GARAGE Demo and Access ramp construction are being handled on separate permits and not covered by this permit.



General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on **any** property **within** the **City**, payment arrangements must **be** made before permits of any kind are accepted.

Total Square Footage of Proposed Structure <u>369</u>		Square Footage of Lot <u>17</u> <u>Portland</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>112</u> Block# <u>B-1</u> Lot# <u>015</u>		Owner: <u>D + S Weeks Properties</u> Telephone:	
Lessee/Buyer's Name (If Applicable) <u>Support Solutions</u>		Applicant name, address & telephone: <u>Bourquin & Sons</u> <u>123 Davis Rd</u> <u>Durham, ME 04222</u> <u>353-7606</u>	
Current Specific use: Proposed Specific use: <u>§ Adult day habilitation</u>		Cost Of Work: \$ <u>1400.00</u> Fee: \$ _____ C of O Fee: \$ <u>39⁰³/10</u>	
Project description: <u>Install B-vent for conv</u>		DEPT OF BUILDING INSPECTION CITY OF PORTLAND, ME <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> FEB 20 2006 </div> <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 5px auto;"> RECEIVED </div>	
Contractor's name, address & telephone: <u>Bourquin</u>			

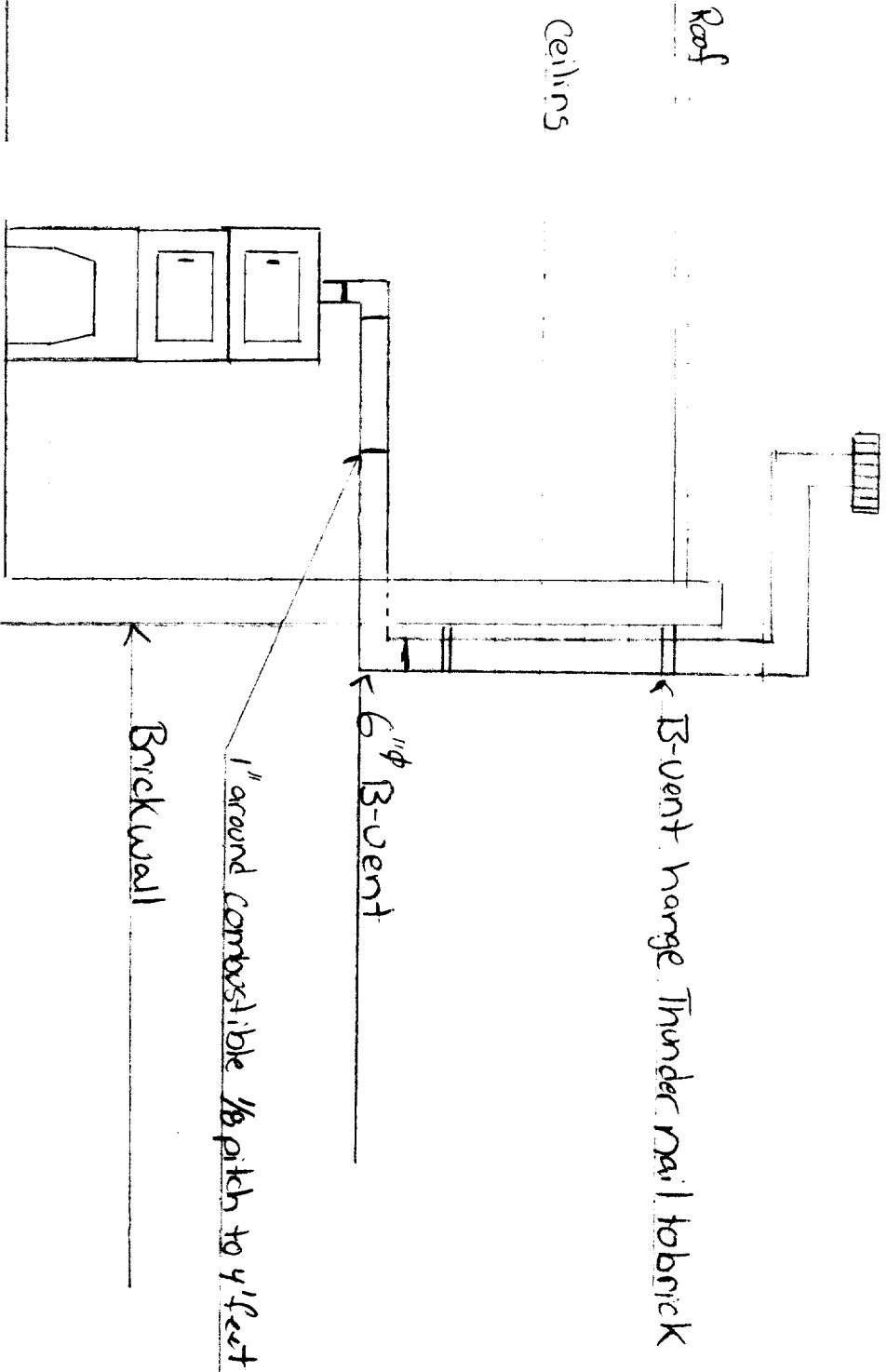
Please submit all of the information outlined in the Commercial Application Checklist. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at www.portlandmaine.gov, stop by the Building Inspections office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature of applicant: <u>[Signature]</u>	Date: <u>2-20-06</u>
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B-Vent from oven



DUKE®

DUKE CONVECTION OVENS
"E" SERIES - DOUBLE SECTION - GAS

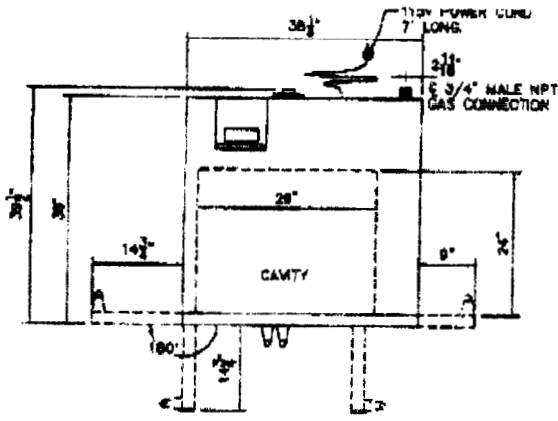
□ **E102-G** Double section, standard depth

Gas Specifications Per Section	
	BTU/Hour
E102-G	49,000
Regulated gas pressure required 3.5" WC natural/10" WC propane	
Combustible surface clearance - 1" side 7" rear, 6" flow	
■ - Gas connection	
3/4" Gas connection	
Electrical requirements: 3.5 Amps/115V - 2.0 Amps/208-240V	
Standard 115V units supplied with 5' cord and plug	

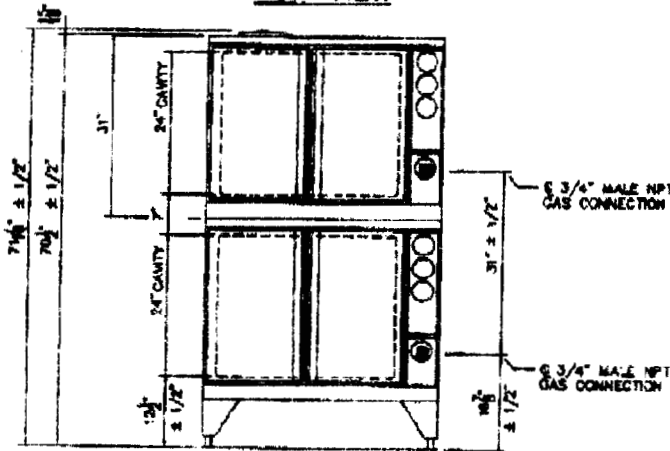
A.I.A. File No. 35-C-13

Catalog No. DCO-EGASD

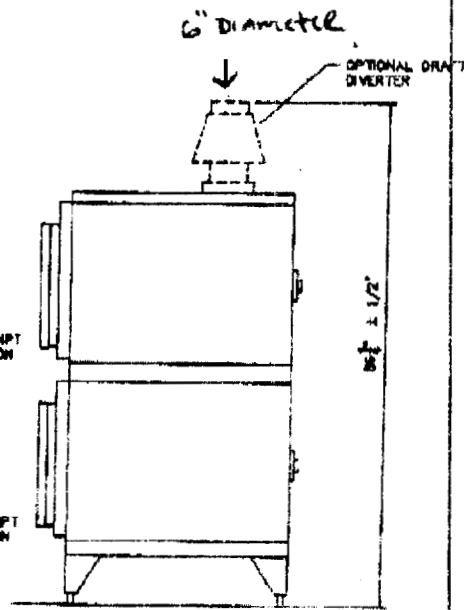
DUKE CONVECTION OVENS - "E" SERIES - DOUBLE - GAS



TOP VIEW



FRONT VIEW



RIGHT SIDE VIEW

DIMENSIONS:

Model	Depth front view		Width		Height top view		Cube ft. crated	Weight	
	in.	cm	in.	cm	in.	cm		lbs.	kg
E102-G	39-1/2	100.3	38	96.5	70-1/2	179.1	69.7	1080	490.9

Specify gas type
 Specify altitude over 2000 feet



"Your Solutions Partner"

DUKE MANUFACTURING CO.
 2305 N. Broadway
 St. Louis, MO 63102

800.735.3953 Toll Free
 314.231.1130 In Missouri
 314.231.5074 Fax
www.dukemfg.com

06/0

Specifications subject to change

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Total Square Footage of Proposed Structure Existing - Change of Use			Square Footage of Lot		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 112 B 015		Owner: D&J Weeks Property LLC		Telephone: 772-0121	
Lessee/Buyer's Name (If Applicable) Support Solutions 124 Canal Street Lewiston, ME 04240			Applicant name, address & telephone: Same		Cost Of 30
105%					
Project description: We provide day habilitation services for adults w/ developmental disabilities. Those services include: skill building, socialization skills, and supportive employment. The first 200 sq ft will be used for a small bakery, retail outlet, work & meeting space for clients, offices for on-site staff and a place for dances.					
Contractor's name, address & telephone: Pre used					
Who should we contact when the permit is ready: Author Lerman					
Mailing address: _____ Phone: 795-0672 ext 102 1-800-435-1795 (pager) call this if over hour.					

Please submit all of the information outlined in the Commercial Application Checklist. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at www.portlandmaine.gov, stop by the Building Inspections office, room 315 City Hall or call 874-8703.

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Signature of applicant [Signature] Its Executive Director 207-795-0672 x102	Date: 12/23/05
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This is not a permit; you may not commence ANY work until the permit is issued.

City of Portland, Maine - Building or Use Permit Application
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 05-1835	Issue Date: 01/17/2006	CBL 112 B015001
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Location of Construction: 369 FOREST AVE	Owner Name: D & J WEEKS PROPERTIES LLC	Owner Address: PO BOX 8009	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Commercial	Zone:

Past USE: Commercial/ Dance Hall	Proposed Use: Change of Use/ Adult day habilitation services	Permit Fee: \$105.00	Cost of Work: \$105.00	CEO District: 1
Proposed Project Description: Change of Use/ Adult day habilitation services		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION Use Group: Type:	
		Signature:	Signature:	
PEDESTRIAN ACTIVITIES DISTRICT (PAD.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
		Signature:	Date:	

Permit Taken By: Idobson	Date Applied For: 12/27/2005	Zoning Approval		
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<p>1.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..</p>	<p align="center">Special Zone or Reviews</p> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> late:	<p align="center">Zoning Appeal</p> <input type="checkbox"/> variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied late:	<p align="center">Historic Preservation</p> <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date:
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SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE